

Proposed Superannuation Declaration Form



Declarant Details

Name			
Firm			
Contact Number		Email	
Role:	<input type="checkbox"/> Accountant <input type="checkbox"/> Financial Planner / Adviser		

I confirm I act as the Accountant / Financial Planner for:

SMSF Name	
Member's Name	

We have discussed the member's SMSF investment strategy and confirm they will be contributing an additional \$ per:

☐ Week ☐ Fortnight ☐ Month

as part of this strategy.

Division 293 Tax Declaration

Is the member subject to Division 293 tax?

☐ Yes ☐ No

If Yes, please complete the following:

The member is aware they may be subject to additional tax payable due to their level of contributions or exceeding income thresholds.

I confirm in my discussions with the member that the additional tax will be paid by:

☐ The member's own money ☐ Releasing money from super

Member's Name Acknowledgement & Signature

I acknowledge the above declaration and confirm my understanding of the contribution strategy and any potential tax implications.

Signature Date / /

Declarant (Accountant/Financial Planner/Financial Advisor) Acknowledgement & Signature

I confirm the above declaration and my role in advising the member regarding their proposed superannuation contributions.

Signature Date / /